

## HAWAII STATE ETHICS COMMISSION

1001 BISHOP STREET, PACIFIC TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: 587-0460 FAX: 587-0470 email: ethics@hawaiiethics.org

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STATE OF HAWA; STATE ETHICS COMMISSION

## LOBBYIST REGISTRATION FORM

(Type or Print Clearly) **PART I** LOBBYIST NAME(Last) (First) (Middle) **TELEPHONE MORRIS** GEORGE "RED" A. 808/531-4551 MAILING ADDRESS (Street) FAX 222 SOUTH VINEYARD STREET, SUITE 401 808/533-4601 (City) (State) (Zip Code) HONOLULU **HAWAII** 96813-2453 EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby) **TELEPHONE** 808/531-4551 CAPITOL CONSULTANTS OF HAWAII MAILING ADDRESS (Street) FAX 222 SOUTH VINEYARD STREET, SUITE 401 808/533-4601 (City) (State) (Zip Code) **HONOLULU HAWAII** 96813-2453

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU L	TELEPHONE 800-624-2931		
CORRECTIONS CORPORATION			
MAILING ADDRESS (Street)	FAX 615-263-3050		
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10 BURTON HILLS BLVD			
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(City)	(State)	(Zip Code)	
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NASHVILLE	TN	37215	
NAME OF PERSON RESPONSIBLE F	OR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT	TELEPHONE 800-624-2931	
KELLY DURHAM			
MAILING ADDRESS (Street)		FAX 615-263-3050	
10 BURTON HILLS BLVD			

(City)	(State)	(Zip Code)			
NASHVILLE	TN	37215			
PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY					
[ ] Agriculture	[ ] Education	[ ] Human Services	[ ] Science, Technology & Economic Development		
[ ] Communications & Public Utilities	[ ] Government Operations & Finance	[ ] Intergovernmental Relations, International Affairs	[ ] Tourism & Recreation		
[ ] Consumer Protection & Commerce	[ ] Hawaiian Affairs	[ ] Labor & Employment	[ ] Transportation		
[ ] Culture, Arts, Historic Preservation	[ ] Health	[ ] Planning, Land & Water Use Management	[ ] Other: (indicate below)		
[ ] Ecology, Energy Environmental Protection	[ ] Housing	[ ] Public Safety & Corrections			
	-				
PART IV CERTIFICATION	OF LOBBYIST				
I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.					
	(Signature of Lobbyist)	(Signature of Lobbyist) / (₺ate)			
DART V. AUTHORIZATION TO LORBY					
PART V AUTHORIZATION TO LOBBY  NAME TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED					
KELLY DURHAM	SENIOR DIRECTOR BUSINESS DEVELOPMENT				
NAME OF ORGANIZATION (if app					
CORRECTIONS CORPORATION OF AMERICA					
MAILING ADDRESS (Street)		FA	X 615-263-3050		
10 BURTON HILLS BLVD					

(State)

(Signature of Authorizing Officer or Person Represented)

ΤN

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.

(Zip Code)

37215

(Date)

(City)

NASHVILLE